



## Community Needs Assessment

### Site: Troy Mills Troy, NH

The Bureau of Environmental and Occupational Health is asking residents, and former residents, who live near the Troy Mills Site to complete this form. This will help us identify any health concerns you may have. Please limit your questions about the Site to human health topics. For example, we are not able to address issues such as property values or effects on pets.

This survey is strictly **CONFIDENTIAL**. The data will be gathered in a report and no names or personal information will be used.

**THANK YOU** for taking the time to complete this survey so that we may better serve you in

If you are interested in being on our mailing list, please provide your name and address below.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (work) \_\_\_\_\_

Email: \_\_\_\_\_

1. How long have you lived at this address? \_\_\_\_\_ (years) \_\_\_\_\_ (months) \_\_\_\_\_

2. Is this a seasonal home? ☐ Yes ☐ No

If yes, how many months do you stay each year? \_\_\_\_\_

3. Do you have children 6 years old or younger who live with you? Yes No

4. How would you like to receive news about the Troy Mills Site?

(Check all that apply.)

☐ Telephone (If yes, what time is best?) \_\_\_\_\_ AM or PM

☐ Mail

☐ Newspapers (which one(s)? \_\_\_\_\_, \_\_\_\_\_)

☐ Cable/TV

☐ Community meeting

☐ Other \_\_\_\_\_

5. To help us determine what you may already know about the Site, please tell us what you have heard about the chemicals that have been found at this Site.
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5B. How did you hear about the chemicals?

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5C. What health impacts or effects have you heard about?

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5D. How did you hear about these impacts or effects?

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6. Do you or does anyone in your home....

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Walk or play on the Troy Mills Site property           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Walk or play in the woods or on trails around the Site | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Play or wade in the Rockwood Brook                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Play, wade or swim in Sand Dam Pond                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Eat fish from Rockwood Brook                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Eat fish from Sand Dam Pond                            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Use the brook or pond for other purposes               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Describe:\_\_\_\_\_

7. Have you seen any thing near or on the Troy Mills Site that could cause you harm? (E.g. fence children can climb, chemical spills, unsafe buildings, etc.)

- ☐ No
- ☐ Yes If yes, please describe:\_\_\_\_\_
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8. Do you feel outdoors activities near the Site are putting you at risk? (E.g. swimming, gardening, fishing, using recreational vehicles)

- ☐ No
- ☐ Yes If yes, please describe the activities:\_\_\_\_\_
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**9. Have you smelled odors coming from the Site?**

- ☐ No
- ☐ Yes If yes, please describe the odor and when it occurs:

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**10. What is your general feeling about this Site? (Please check one.)**

- ☐ It does not affect my health.
- ☐ It does affect my health.
- ☐ I am not sure.

**11. What is your level of interest in this Site? (Please check one.)**

- ☐ Very interested
- ☐ Somewhat interested
- ☐ Not interested

**12. Do you have any other health-related questions or concerns about the Troy Mills Site that you would like us to discuss in the Public Health Assessment?**

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The Department of Health & Human Services can provide physicians with information about the potential health problems linked to previously dispose of chemicals at the Site. Would you like your physician to be added to our mailing list?

Physician Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone:\_\_\_\_\_

**Completed surveys can be placed in secured drop boxes located at the Troy Town Hall or Library. Thank you for your participation. We will keep you updated on any new information.**

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Keep this portion for your information should you require additional information.  
Thank you again for taking the time to complete this survey. Please feel free to call us at **(603) 271-3994** or toll free in NH at (800) 852-3345 extension 3994. You may also write to us at:

NHDHHS, Bureau of Environmental and Occupational Health

29 Hazen Drive

Concord, NH 03301

Fax: (603) 271-3991

*Vickie A. Shallow*

Health Promotion Advisor

**Email: [vshallow@dhhs.state.nh.us](mailto:vshallow@dhhs.state.nh.us)**